

1.) CORPORATION NAME:

AANA Association Management Services Inc.

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1758806**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 116 S PROSPECT AVENUE

CITY/ST/ZIP: PARK RIDGE, IL 60068

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	WANDA WILSON, CRNA, PHD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	c/o AANA 222 S PROSPECT AVENUE		
CITY/ST/ZIP/CO:	PARK RIDGE, IL 60068		
NAME:	JOHN FETCHO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	c/o AAMS, Inc. 116 S. PROSPECT AVE.		
CITY/ST/ZIP/CO:	PARK RIDGE, IL 60068		
NAME:	DENNIS C. BLESS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	c/o AANA 222 S. PROSPECT AVE.		
CITY/ST/ZIP/CO:	PARK RIDGE, IL 60068		
NAME:	BARRY CRANFILL, CRNA, MHS, MBA, FAAPM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	c/o AANA 222 S. PROSPECT AVE		
CITY/ST/ZIP/CO:	PARK RIDGE, IL 60068		
NAME:	KATHLEEN KINSLOW, CRNA, EDD, MBA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	c/o AANA 222 S. PROSPECT AVE.		
CITY/ST/ZIP/CO:	PARK RIDGE, IL 60068		

NAME: Margaret Jung TITLE: Acting VP/T ADDRESS: c/o AANA 222 S. Prospect Ave. CITY/ST/ZIP/CO: Park Ridge, IL 60068	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Henry Talley TITLE: DIRECTOR ADDRESS: c/o AANA 222 S. Prospect Ave. CITY/ST/ZIP/CO: Park Ridge, IL 60068	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: John McFadden TITLE: DIRECTOR ADDRESS: c/o AANA 222 S. Prospect Ave. CITY/ST/ZIP/CO: Park Ridge, IL 60068	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ JOHN FETCHO	JOHN FETCHO, SECRETARY	5/16/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		